

February 1, 2007

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Dear Sir:

Please revoke the previous power of attorney and change correspondence address for application 10/774,207 as indicated in the attached forms SB82. If you need additional information, please call me at 650-599-9770.

Sincerely,

Vladimir Matena 1322 Kentfield Ave

Redwood City, CA 94061

Oladin Malina

Tel: 650-599-9770

PTO/SB/82 (01-06)
Approved for use through 12/31/2008. OMB 0651-0035
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<i>(c)</i>	Application Number	10/774,207
REVOCATION OF POWER OF ATTORNEY WITH	Filing Date	February 6, 2004
	First Named Inventor	Vladimir Matena
NEW POWER OF ATTORNEY	Art Unit	
AND CHANGE OF CORRESPONDENCE ADDRESS	Examiner Name	
CHANGE OF CORRESPONDENCE ADDRESS	Attorney Docket Number	

I hereby revoke all previous powers of attorney given in the above-identified application.							
	<del></del>	ney is submitted herewith.					
OR  I hereby appoint the practitioners associated with the Customer Number:							
Please change the correspondence address for the above-identified application to:  The address associated with Customer Number:  OR							
	ual Name	Vladimir Matena					
Address		1322 Kentfield Ave					
City		Redwood City	State	CA		Zip	94061
Country		USA					
Telephone		650-599-9770		Email	vmatena@hotmail.c	com	
I am the:  Applicant/Inventor.							
Assignee of record of the entire interest. See 37 CFR 3.71.  Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)							
SIGNATURE of Applicant or Assignee of Record							
Signature	Signature Vladin Maline						
Name \	Vladimir Mate	∍na					
Date	January 10, 2	2007	Te	elephone	e 650 599 9770		
NOTE: Signatures signature is require	of all the invented, see below*.	ntors or assignees of record of the entire inte	erest or their rep	resentative	(s) are required. Submi	t multiple	forms if more than one
✓ *Total of	f <u>3</u>	forms are submitted.					

This collection of information is required by 37 CFR 1.36. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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## REVOCATION OF POWER OF ATTORNEY WITH **NEW POWER OF ATTORNEY**

AND						
<b>CHANGE O</b>	CORRESPONDENCE	<b>ADDRESS</b>				

Application Number	10/774,207
Filing Date	February 6, 2004
First Named Inventor	Vladimir Matena
Art Unit	
Examiner Name	
Attorney Docket Number	

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A Power of Attorney is submitted herewith.							
OR  I hereby appoint the practitioners associated with the Customer Number:							
Please change the correspondence address for the above-identified application to:  The address associated with Customer Number:							
Firm o	r ual Name	Vladimir Matena					
Address		1322 Kentfield Ave					*****
City		Redwood City	State	CA		Zip	94061
Country		USA					
Telephone		650-599-9770		Email	vmatena@hotmail.c	om	
I am the:  Applicant/Inventor.  Assignee of record of the entire interest. See 37 CFR 3.71.							
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)							
SIGNATURE of Applicant or Assignee of Record Signature							
Name	Margr						
Date	Magnus #riks		Т	lephone			
	January 10, 2	· · ·			10 077 10001	· multiple	farms if more than one
signature is requi		ntors or assignees of record of the entire inte	erest or their repr	esentative	s) are required. Submi	i niuiupa	a torms ii more than one
*Total of 3forms are submitted.							

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**Application Number** 10/774,207 TRADEMARK **REVOCATION OF POWER OF** Filing Date February 6, 2004 **ATTORNEY WITH** First Named Inventor Vladimir Matena **NEW POWER OF ATTORNEY** Art Unit AND **Examiner Name CHANGE OF CORRESPONDENCE ADDRESS Attorney Docket Number** 

I hereby revoke all previous powers of attorney given in the above-identified application.							
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OR  I hereby appoint the practitioners associated with the Customer Number:							
Please change the correspondence address for the above-identified application to:  The address associated with Customer Number:							
Firm o	<i>r</i> ual Name	Vladimir Matena					
Address							
City		Redwood City	State	CA		Zip	94061
Country USA							
Telephone		650-599-9770		Email	vmatena@hotmail.c	om	
I am the:  Applicant/Inventor.  Assignee of record of the entire interest. See 37 CFR 3.71.  Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)							
SIGNATURE of Applicant or Assignee of Record							
Signature	J	as Jeun					
Name	Jens Jensen						
Date	January 10, 2		1	elephon	10 10001112		
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.							
*Total of 3 forms are submitted.							

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